## FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response. . . . . . 16.00

SEC USE ONLY						
Prefix	. •	Serial	_			
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DATE RECEIVED						
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Name of Offering ( check if this is an ame	ndment and name has changed, and indicate change.)	
Park Villas Holding LLC	numerical and manie has changes, and more change,	
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rule 506 Section 4(6	ULOE SEC MAIL
Type of Filing:	ment	App Recented
	A. BASIC IDENTIFICATION DATA	\$ 7P \ [8]
1. Enter the information requested about the i	SSUCT	图 多次 周
Name of Issuer ( check if this is an amendr	nent and name has changed, and indicate change.)	
Park Villas Holding LLC		15/786 TUN
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
8412 Auburn Avenue	Bethesda Maryland 20814	(301) 986-1400
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		(204) 000 4400
8412 Auburn Avenue	Bethesda, Maryland 20814	(301) 986-1400
Brief Description of Business		
Operation of Apartment Complex		
Type of Business Organization		PROCESSEI
- · · · - · · · · · · · · · · · · · · ·	mited partnership, already formed	please specify):
business trust li	mited partnership, to be formed limited liabi	lity company APR 1 3 2007
	Month Year	A. N. I. J. ZUUT
Actual or Estimated Date of Incorporation or Or		
Jurisdiction of Incorporation or Organization: (	Enter two-letter U.S. Postal Service abbreviation for Stat	" FINANCIAL
	CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of 77d(5).	securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC) on the earlier	han 15 days after the first sale of securities in the offering of the date it is received by the SEC at the address given b ited States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange C	Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice photocopies of the manually signed copy or bear	must be filed with the SEC, one of which must be manual r typed or printed signatures.	lly signed. Any copies not manually signed must be
	in all information requested. Amendments need only repo any material changes from the information previously supp	
Filing Fee: There is no federal filing fee.		
State:		
This notice shall be used to indicate reliance or ULOE and that have adopted this form. Issuer are to be, or have been made. If a state require	In the Uniform Limited Offering Exemption (ULOE) for its relying on ULOE must file a separate notice with the est he payment of a fee as a precondition to the claim for in the appropriate states in accordance with state law	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
	ATTENTION	
	e states will not result in a loss of the federal e ult in a loss of an available state exemption unl	

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filing of a federal notice.

A. BASIC IDENTIFICATION DATA		2.5
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of the control of the contro	of, 10% or more of	a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and man	aging partners of	partnership issuers; and
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Michael Gross Officer of Managing Member		
Business or Residence Address (Number and Street, City, State, Zip Code) 8412 Auburn Avenue Bethesda, Maryland 20814	<u> </u>	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Douglas Margerum Officer of Managing Member		
Business or Residence Address (Number and Street, City, State, Zip Code) 8412 Auburn Avenue Bethesda, Maryland 20814		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		<del> </del>
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)	·	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		· · · · · · · · · · · · · · · · · · ·

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1.	Has the	issuer sold	or does th	ne issuer in	itend to sel	l. to non-ac	credited in	nvestors in	this offeri	ne?		Yes <b>F</b> i	No <b>⊡</b>
••	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								_	_			
2.	What is	the minim	um investm	ent that w	ill be acce	pted from a	ny individ	ual?				\$_15,0	00.00
_	in .	•										Yes	No
3.			oermit joint									<b>x</b>	<u></u>
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									,			
	I Name (I ne being		first, if indi	ividual)								:	
	-	•	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)	<u> </u>			· · ·	i	
	1												
Nai	me of Ass	ociated Br	oker or Dea							•		•	
Sta	tes in Wh	ich Person	Listed Has		or Intends		urchasers						
	(Check	'All States	" or check	individual	States)							All States	
	(AL)	ĀK	ĀZ	AR	CA	CO	[CT]	DE	DC	FL	GA	HI	[ID]
	IL	[Ň]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОH	<u>OK</u>	OR	PA
	RI	SC	SD	[TN]	TX	[UT]	VT	VA	WA	WV	WI	WY	[PR]
Ful	I Name (I	ast name	first, if indi	ividual)									
Bu:	siness or	Residence	Address (N	Number an	d Street, C	City, State, 2	Zip Code)				<del>-</del>	:	
		·			10001100				•				
Na	me of Ass	ociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers		_				
	(Check	"All States	or check	individual	States)				***************************************			☐ AI	l States
	AL	AK	ΑŽ	AR	CA	CO	CT	DE	DC	FL	ĞA	ΗÏ	ID
	ĪĹ	IN	1A	KS	KY	LA	ME	MD	MA	MI	MN .	MS	MO
	MT	NE SCI	NV)	NH	NJ	NM CIT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
_	· RI	SC	SD	[TN]	TX	ŪT]	VT	. <u>VA</u>	WA.	[¥¥ ¥]	1971		
Fu	II Name (I	Last name	first, if ind	ividual)							1		
Business or Residence Address (Number and Street, City, State, Zip Code)													
Na	ine of Ass	ociated Br	roker or De	aler				•		: <u>-</u>	<u> </u>		
		ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	;					<del></del>
Sta	ites in Wh	(Check "All States" or check individual States)							. All States				
Sta		"All States	s" or check	individua	i States)							<u> </u>	Juics
Sta	(Check					<u>[CO]</u>		DE	[DC]	FL	GA	HI	ID
Sta		"All States  [AK]  [IN]  [NE]	S" or check  AZ  IA  NV	individua (AR) (KS) (NH)	CA KY NJ		CT ME NY	DE MD NC	DC MA ND	FL MI OH			

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security Debt \$ Equity \_\_\_\_\_\_\_\_\_ \$ 3,125,000.00 0.00 Common Preferred Convertible Securities (including warrants) \$\_\_\_\_\_ Partnership Interests \$ \$ 0.00 Other (Specify \_\_\_\_\_\_\_\_ \$ 0.00 \$ 0.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases s 3,100,000.00 Accredited Investors Non-accredited Investors 0 § 0.00 Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A ..... Rule 504 \$ 0.00 Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$ 3,000.00 Printing and Engraving Costs..... 33,215.00 Legal Fees Accounting Fees 0.00 0.00 Engineering Fees \$ 0.00 Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) 36,215.00 Total ..... \$

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	G OFFERINGIPRICE NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS.	
í	Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groporoceeds to the issuer."	SS	§ 3,088,785
(	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted group proceeds to the issuer set forth in response to Part C — Question 4.b above.	ıd	
		Payments to Officers. Directors, & Affiliates	
:	Salaries and fees	🔲 \$	s
i	Furchase of real estate	🔲 \$	
	Purchase, rental or leasing and installation of machinery and equipment	🗀 \$	s
(	Construction or leasing of plant buildings and facilities	🔲 \$	s
(	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	.□\$	□\$
	Repayment of indebtedness Bridge Loan	_	_
	Working capital		
	Other (specify): Closing Costs and Escrows, Loan and Lender Fees and Partial Funding of Replacement Reserves	_	
-		🗀 \$	[] S
. (	Column Totals	[] \$ <u>2.097.</u>	261 <u> </u>
i	Total Payments Listed (column totals added)		<u>3,088,78</u> 5
	D. FEDERAL SIGNATURE		
signa	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice to reconstitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commonformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ission, upon wri	
	r (Print or Type) k Villas Holding LLC	Date 416	107
Name	of Signer (Print or Type)  Title of Signer (Print or Type)		<del>-</del> \:
· Micl	hael Gross Officer of Managing Member		

- ATTENTION --

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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